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- Solano County Medical Society. Meets Second Tuesday, 8:00 p.m., at different meeting places.
- Pres., O. S. Nesting, 841 Georgia, Vallejo. Secy., Harle B. Grover, 327 Georgia, Vallejo.
- Sonoma County Medical Society, 300 American Trust Bldg., Santa Rosa. Meets Second
- Pres., Walter E. Weber, Room 304, American Trust Bldg., Santa Rosa.
- Secy., Clayton B. Taylor, Room 304, American Trust Bldg., Santa Rosa.
- Stanislaus County Medical Society, 702 18th St., Modesto. Meets Third Tuesday of the month, 7 p.m., Hotel Covell, Modesto.
- Pres., Guerne W. DeLappe, 301 Downey Ave., Modesto.
- Secy., Robert W. Purvis, 709 18th St., Modesto.
- Tehama County Medical Society. Meets at call of President.
- Pres., G. W. Ingle, 304 Solano St., Corning. Secy., L. Wolfe, 75 Belle Mill Rd., Red Bluff.
- Tulare County Medical Society.
- Pres., Cyril H. Johnson, 795 Cherry Ave., Tulare.
- Secy., Victor A. Badertscher, 499 North L St., Dinuba.
- Ventura County Medical Society. Meets Second Tuesday, 7:15 p.m., Colonial House, ond Tue Oxnard.
- Pres., Joseph F. Maguire, 2755 Loma Vista Rd., Ventura.
- Secy., F. K. Helbling, 34 N. Ash St., Ventura. Yolo County Medical Society. Meets First
- Pres., Ernie A. Young, 1st and Main Sts., Win-
- Secy., James A. Kennedy, 218 F St., Davis.
- Yuba-Sutter-Colusa County Medical Society. Meets Second Tuesday.
- Pres., Rocco A. Montano, 316 G St., Marys-Secy.. Robert I. Hodgin, Box 749, Marysville.

(For roster of C.M.A. committees and other organizations, see last month's issue.)

#### Gin and Tonic, Cashew Nuts Cause Skin Reactions

"New drugs, new eruptions" has long been an adage of dermatologists. Now it seems necessary to add to it: "New drinks, new eruptions," and maybe even, "New travels, new eruptions."

Two unusual cases of skin sensitivity—one to the recently popular drink, gin and tonic, and the other to unroasted cashew nuts found in the tropics—were recently reported.

The reports were made in letters to the editor of the *Journal of the American Medical Association* and appeared in a recent issue.

Drs. Frederick G. Novy Jr. and Gordon R. Lamb, Oakland, California, told of a patient who developed a severe reaction after drinking gin and tonic (quinine water) because of his sensitivity to quinine.

They said that such sensitivity may produce headache, tinnitus, deafness, dizziness, visual impairment, fever, nausea, vomiting, and, most commonly, skin eruptions.

Their patient knew he was sensitive to quinine and usually avoided drinking quinine water. However, he attended a party at which only gin and tonic was served and, in the course of three hours, had several drinks. The doctors estimated that he con-

sumed only about 45 milligrams of quinine, yet he developed a severe reaction—eruptions, redness, and swelling occurred all over his body within 24 hours.

At the end of 16 days, including six in the hospital, the eruption had cleared except for a few spots on his hands and feet. Treatment included aluminum acetate solution dressings, corticotropin, and trepelennamine citrate.

The case of cashew nut sensitivity was seen by Drs. Carroll S. Wright and Donald N. Tschan, Temple University Medical Center, Philadelphia. They reported it to the *Journal* because Americans traveling abroad may develop the eruption, "one that is scarcely mentioned in the textbooks."

Dermatitis from the cashew nut is rare in the United States. The tree grows chiefly in tropical America, Africa, and the West Indies, and dermatitis results only from contact with the rind oil and not from the nutmeat. In preparation for commercial use, the nuts are roasted, causing the outer shell to burst open and release the oil, which burns away.

The patient picked cashews while traveling in Ceylon. She immediately developed a severe inflammation on the hands, neck and face. The cause was not determined until she came home, opened some nuts she had brought with her, and developed a similar eruption.

#### Hardening of Arteries Found in Baboon

Hardening of the arteries, a fairly common disease of man, has been described in the Doguera baboon by two California researchers.

Arteriosclerosis has been rarely described in subhuman primates, either as a naturally occurring or experimentally produced disease, Drs. Stuart Lindsay and I. L. Chaikoff of the University of California said.

They autopsied two male baboons, each about 20 years old, which had lived continuously in the San Diego Zoo. They were fed a diet of bread and seasonal vegetables and fruits (lettuce, carrots, potatoes, oranges, bananas, apples, grapes, and watermelon).

The disease process in the baboons was similar to that seen in other species, including man, birds, dogs, and cats, they said in a recent issue of *Archives of Pathology*, published by the American Medical Association.

However, there were some differences in the disease process in the various animals. While fatty deposits in the arterial walls are often associated with arteriosclerosis, there were only a few found in the baboons' artery walls. Those that were found probably were manufactured on the spot, and not transported there from elsewhere in the body, the researchers said.

They said it was "of special interest" that the baboons had been on a diet low in fats and probably

devoid of cholesterol. This was one reason for suggesting that the fatty acid deposits were manufactured. Other reasons were the position of the fatty deposits, which were low in cholesterol, and previous findings that normal artery walls of various animals are capable of synthesizing cholesterol and fatty acids.

The disease occurred in the aorta—the major blood vessel leading from the heart; the arteries of the heart itself, and the common iliac arteries in the pelvis, abdominal wall, and lower limbs.

They said the arteriosclerotic process appeared to occur this way: The inner elastic membranes or middle elastic layers of the artery walls degenerated; then they were rebuilt in layers with depositing of carbohydrate substances, thickening of the walls, and formation of plaques. There was a minimum of fatty depositing, which probably was secondary to the major process of rebuilding.

This sequence of events and the type of material in the rebuilt artery walls was the same as that found in some other animals and man, they said.

Arteriosclerosis has also been found in cows, elephants, one gorilla, and a few new and old world monkeys, but not in the higher apes (chimpanzees, orangs, and gibbons) or in lemurs.

It has been produced experimentally in rhesus monkeys which were subjected to prolonged vitamin B<sub>6</sub> deficiency and in cebus monkeys fed diets low in sulfur amino acids and high in cholesterol.

## American Medical Association Committee Helps TV, Radio Producers

Twelve United States doctors are helping America's 50 million television viewers get a more authentic picture of medicine.

They are members of the American Medical Association's Physicians Advisory Committee on Television, Radio, and Motion Pictures, whose work is outlined in an article and editorial in a recent issue of the Journal of the American Medical Association.

Organized in February, 1956, under the leadership of the A.M.A. Board of Trustees and department of public relations, the committee is composed of physicians in Los Angeles and New York, the two cities where 95 per cent of all television, radio, and movie productions originate.

It was organized because the increasing number of television shows dealing with aspects of medicine created a need for a central advisory group. Until last year, producers sought advice from individuals, the A.M.A.'s Chicago headquarters, the New York medical societies, or the Los Angeles County Medical Association.

The article quoted Dr. Robert W. Gentry, chairman of the committee's Los Angeles group, as say(Continued on Page 18)

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Thirst, too, seeks quality

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#### **American Medical Association Committee** Helps TV, Radio Producers

(Continued from Page 14)

ing, "The primary purpose of this committee is assistance. We are making ourselves available as advisors, not imposing ourselves as censors."

The committee tries to advise portraval of realistic medical situations, the article said. Among suggestions to television producers who have requested script review were:

"A sedative is usually not administered by hypo. It would be better to give a capsule with a glass of water."

"A patient hanging between life and death would not be left unattended."

However, the committee realizes that medical fiction need not always conform to the usual practice of medicine at the expense of certain elements of drama, the article said. For example, after reviewing one script, the committee pointed out that it would be unlikely that a doctor would operate on a member of his own family, and that the training period necessary for such surgery would be greater than shown, but "it was agreed that a certain degree of dramatic license must be permitted in a program of this nature."

(Continued on Page 27)

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(Continued on Page 50)

#### Laos Mission

Medicine can be used as a weapon of foreign policy by helping to liberate people from the "tyrannies of ignorance and disease," a young American doctor working in Southeast Asia said recently.

In a letter published in a recent issue of the Journal of the American Medical Association, Dr. Thomas A. Dooley brought American doctors up-to-date on his medical mission to Laos, a kingdom in Indo-China.

As a Navy officer, Dr. Dooley supervised a medical camp for refugees during the 1954-1955 evacuation of Viet-Nam. Last fall he returned to that area with three former Navy corpsmen to help the people medically and to show them what Americans are like.

An editorial in the same American Medical Association *Journal* said that Dr. Dooley, who expects to return eventually to private practice in the United States, feels "that physicians have a special calling to help underdeveloped communities of the world which are threatened by communism."

It added, "Dr. Dooley's experience and high purpose may inspire other young men to go to parts of threatened Asia to take part in this great medical mission and to be salesmen for democracy."

Dr. Dooley, whose home is in Washington, D. C., and his three assistants, Norman Baker, Berlin, N. H., Peter Kessey, Port Arthur, Texas, and Dennis D. Shepard, Salem, Ore., are working in the village of Vang Vieng, an eight-hour jeep trip north of the capital, Vientiane.

They have a three-room, "25-mat" hospital. He noted that the bamboo mats on the floor are not so difficult for the patient but "play havoc on an Anglo-Saxon physician's back pain."

The typical day of the "Mekong Medicine Men" starts at dawn with a breakfast of "yesterday's pay"—fried eggs. By the time they reach the hospital, 50 people are waiting. Ward rounds and sick call include such medical problems as malaria, machete-inflicted wounds of the legs (the people hack their existence out of the jungle), obstetric problems, some nutritional diseases springing more from ignorance than famine, chronic leg ulcers, and arthritis.

Some "rather esoteric" diseases present themselves, such as "tingling over the right knee cap that rapidly leaps into the nostril, and is present only when the sun sets every night," he said.

Three Laos nurses always help the Americans, since it increases their prestige and education and keeps the Americans from blundering too badly over such words as "chep hua" which can mean "headache" or "criminally insane."

In the afternoon two men go into the surrounding mountains to treat tribes, while the others hold classes in Vang Vieng. One is for 300 children on hygiene and sanitation; the second is a midwifery course for 15 girls from 15 different villages; and

(Continued on Page 54)

## American Medical Association Committee Helps TV, Radio Producers

(Continued from Page 18)

There seem to be limitless varieties of medical story lines, the article said. For that reason many branches of the profession are represented in the committee:

Dr. Gerald D. Dorman, chairman of the New York committee, has an industrial health practice, while his colleagues—Drs. Henry Fineberg and Renato Azzari—are respectively a hospital administrator and a surgery professor.

Co-chairman Robert Gentry in Los Angeles is a chest surgeon. Committee members there are Drs. Vincent Askey (surgeon, speaker of the A.M.A. House of Delegates), Dudley Manchester Cobb Jr. (general practitioner), Eugene F. Hoffman (urologist), Richard O. Myers (pathologist), Marcus H. Rabwin (surgeon), Charles C. Stehley (internist),

James F. Regan (surgeon), and Edward T. Tyler (infertility specialist).

The Journal editorial said about the committee's work, "One result of this voluntary liaison between the medical profession and the entertainment industry is a sharpened awareness of health among television, movie, and radio audiences—and a clearer public understanding of medicine's public service role. This, in turn, is whetting the public appetite for more programs about doctors and their work."

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PAGE 50



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## Health Problems Occurring from Household Chemicals, Including Drugs

IRVIN KERLAN, M.D., Washington, D.C.

The lack of identification of hazardous ingredients and precautionary labeling on the wide variety of small, packaged chemical items in general use and the influence of this lack of identification on their careless and improper handling and storage is the underlying theme of this report. The Board of Trustees of the American Medical Association recently authorized the Committee on Toxicology to develop model legislation on labeling of the many possibly harmful chemicals not now so regulated. It was recommended that interested organizations and individuals with experience in this problem be invited to collaborate. A legislative conference to consider the formulation of a uniform chemical label law will be held on completion of a current study of existing statutes pertaining to the labeling of chemicals.

BERNARD E. CONLEY, Ph.D., Secretary, Committee on Toxicology

In 1955¹ solid and liquid substances were designated as the causative agents in 1,431 deaths due to accidental poisoning. Gases and vapors were responsible for 1,163 deaths. Suicide from self-inflicted poisoning from solid and liquid substances and gases accounted for 3,429 additional deaths. For practical

Associate Medical Director and Chief, Research and Reference Branch, Division of Medicine, Food and Drug Administration, Department of Health, Education, and Welfare.

partment of Health, Education, and Wellace.

Based on an address read before the Second Symposium on Hazardous Household Chemicals and Agricultural Poisons, sponsored by the Committee on Toxicology and the Committee on Pesticides, American Medical Association, at the annual meeting of the American Association for the Advancement of Science, Atlanta, Ga., Dec. 29, 1955.

purposes these 6,023 deaths occur in and about the home. Of the 1,431 accidental poisonings by liquid and solid substances, 358 occurred in children under 5 years of age; 44 of the 1,163 deaths due to gases and vapors were found in children under 5 years.

These imposing statistics do not give us an absolute picture of the problem; the number of nonfatal poisonings is estimated to be 100 to 150 times the number of fatalities. It should be recognized, too, that, although the present death rate for all types of poisoning from solid and liquid substances is about one-third that of 50 years ago, the total number of preventable deaths continues to be a large and impressive one.

#### **PREVENTION**

In evaluating the persistently high number of accidental poisonings (from household products) that have a causal relationship to environmental factors, it becomes apparent that many individuals do not regard as harmful many liquid or solid substances that they know are inedible. For example, physicians appreciate this fact when called to treat the child who has ingested furniture polish, left accessible by his mother, who did not know that such polish may be capable of poisoning.

This unawareness may be caused by a lack of informative and precautionary labeling on numerous

(Continued on Page 33)

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## Health Problems Occurring from Household Chemicals, Including Drugs

(Continued from Page 32)

household items to identify their composition; their potentialities for harm, if any; directions for safe use; and methods of emergency treatment in case of misuse. Lack of this type of information on the many different items available in every pantry, medicine cabinet, basement, garage, and elsewhere around the home may serve as an important basis for careless or improper handling or storage. The Committee on Toxicology of the American Medical Association estimates that there are a quarter of a million different brand-name products available.

Inadequate information on the label is an important gap in protection of the consumer against accidental poisoning by household products because it is a major obstacle to the successful attack on the problem. Not only does the failure to label household articles informatively create circumstances that lead to accidents, but it frequently enhances their seriousness by complicating proper treatment. Physicians or others providing emergency treatment need to know the identity of the offending substance. Lack of this information frequently results in the use of vague and indefinite terminology and consequently poor case-recording. Thus, unsatisfactory treatment of the patient may occur as well as inaccurate sta-

tistics, which tend to obscure the problem and thus complicate its solution.

To ascertain the contents of potentially harmful household products in order to assist physicians, pharmacists, and others who seek such information in emergency situations, Rodman<sup>2</sup> conducted an extensive survey of various manufacturers regarding household products not covered by existing federal laws. He concluded that there is need for more adequate labeling of articles concerning contents and precautions against misuse as well as for prompt and continued education of users.

#### HAZARDOUS HOUSEHOLD ITEMS

Household articles may be readily separated into two groups on the basis of whether their labeling and packaging are subject to federal statutory control in the interest of protection of the consumer against accidental poisoning (see table). Certain states and municipalities have taken forthright steps to control some of these offending items.

Drugs and disinfectants intended for use on man and animals are subject to the Federal Food, Drug, and Cosmetic Act of 1938, enforced by the Food and Drug Administration. Disinfectants for inanimate objects and pesticides are subject to the Insecticide, Fungicide, and Rodenticide Act of 1947, enforced by the United States Department of Agriculture. Recently the FDA procedure for setting safe tolerances (Continued on Page 44)

WEDE OUT
Message: WHILE YOU WERE OUT  Mrs. Amadeo phoned that the prescription actually seems  Mrs. Amadeo phoned that the prescription actually seems  To played it safe
Mrs. Amadeo phoned that the prescription actual Mrs. Amadeo phoned the prescription actual Mrs. Amadeo phoned the prescription actual Mrs. Amadeo phoned the prescription actu
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to iffication to the local anesthetic, you returned.
Mrs. Amadeo phoned  to irritate her little boy's ivy poisoning.  to irritate her little boy's ivy poisoning.  sensitive to the local anesthetic, so I played it safe  sensitive to the local anesthetic, so I played it safe  sensitive to the local anesthetic, so I played it safe  sensitive to the local anesthetic, so I played it safe  sensitive to the local anesthetic, so I played it safe  sensitive to the local anesthetic, so I played it safe
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0:10 a.m.
TELEPHONED X PLEASE CALL  TELEPHONED X PLEASE CALL  Scalled Mrs. Amadeo last night after  Scalled Mrs. Amadeo last night after night after night a
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hours Calmital appears to receive the itching without complications the itching without continue it. How
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#### **Hyaluronidase Reduces Fracture Swelling**

A drug which has been used to aid local anesthesia in eye operations has been found helpful in setting a compound fracture of the leg.

Two Texas doctors reported using hyaluronidase to reduce swelling in the foot and lower leg after the leg was broken. Accumulated fluid in the area cut off the blood supply to the foot and made it impossible to close the incision made in order to set the bones.

Capt. Leroy W. McDaniel (MC), chief of surgical services at the 4462nd USAF Hospital, Foster Air Base, Victoria, Texas, and Dr. Jerome C. Hohf,

Marlin, Texas, civilian consultant to the hospital, made their report in a recent issue of the *Journal* of the American Medical Association.

Hyaluronidase is an enzyme, a chemical substance which induces certain bodily changes without undergoing any change itself. Hyaluronidase softens certain tissue substances and allows injected solutions, such as local anesthetics or penicillin, to spread farther and faster than normal and speeds their absorption.

Hyaluronidase had the same effect of speeding the spread and absorption of accumulated fluid in (Continued in Back Advertising Section, Page 70)

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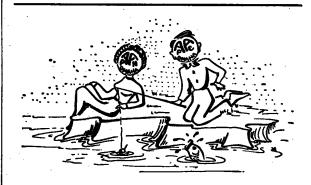
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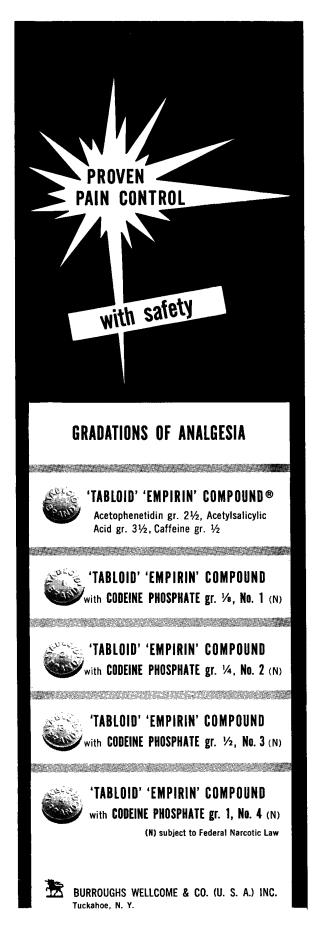
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## Health Problems Occurring from Household Chemicals, Including Drugs

(Continued from Page 33)

for pesticides on crops was revised and simplified. The 12 caustic and corrosive acids and alkalis in certain concentrations designated in the Federal Caustic Poison Act of 1927 are also controlled by the FDA. The latter legislation was achieved through the efforts of the American Medical Association. Although many new chemicals have been introduced since the enactment of the law, it has never been amended to provide for these developments.

Status of Household Articles Under Federal Laws Regarding Identity of Contents and Precautions in Labeling

Regulated	Nonregulated
Drugs	Cosmetics
	Heating, power, and lighting fuels
Disinfectants	Household care and repair articles, including water repellents, leather dressings, preservatives
Economic poisons (pesticides)	Household cleansers (other than acids and alkalis), including soaps and other detergents, solvent cleaning fluids, polishes and waxes, deodorizers
Caustic and corrosive acids and alkalis	Paint and accessories, including thinners, removers
	Miscellaneous items, such as toys, inks and dyes, hobby supplies, novelties

All the federal laws cited have the common requirement that the active ingredients be declared on labels by their common names, together with directions for use and warnings against injury under specified conditions of use. In addition, the 12 caustics and corrosives and those pesticides (economic poisons) deemed highly toxic to man must carry the poison legend and directions for emergency treatment.

#### DRUGS

Among the drugs, methyl salicylate, aspirin, certain other salicylates, and iron deserve to be specially mentioned, particularly with regard to poisoning in children.

Since methyl salicylate has a long history of fatalities caused by accidental ingestion, the FDA requires that the label of any drug containing over 5 per cent of this chemical bear a conspicuous warning that it be kept out of the reach of children. This warning has been widely adopted. With proper attention to this admonition, a reduction in serious poisonings and deaths from misuse of this drug should be achieved.

Aspirin and other salicylates are among the sub-

stances most frequently misused by children. This fact is revealed by morbidity statistics compiled by the poisoning control centers, sponsored by the American Academy of Pediatrics and other health groups, and by mortality statistics of the National Office of Vital Statistics. On February 14, 1955, the FDA invited the Medical Advisory Panel on the Accidental Ingestion and Misuse of Salicylate Preparations by Children to consider this problem and its solution in the interest of protecting the public health. As a result, the following recommendations were made concerning the labeling that should be employed for salicylate preparations to meet the requirements of certain provisions of the Federal Food, Drug, and Cosmetic Act. A period of six months from the date of publication3 was allowed for modification of existing labeling to comply with these requirements.

1. The labels of such preparations should carry a warning, such as the following:

"Warning: Keep out of the reach of children" or "Warning: Keep this and all medications out of the reach of children."

Some manufacturers seem to agree with the broad educational and constructive aspects of this latter caution and are voluntarily considering its use on many other types of medications.

2. In lieu of specific dosage recommendations for children under 3 years of age, the directions for oral use of salicylate preparations should bear a statement such as:

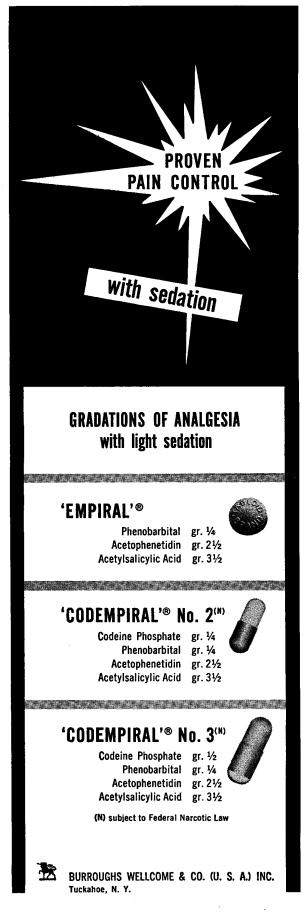
"For children under 3 years of age consult your physician."

Some physicians who have attributed the major problem of salicylates not only to their widespread availability but also to the introduction of "baby size" or "candy type" aspirin have questioned the philosophy of "candy" medication.<sup>4</sup>

Iron sulfate is generally regarded as one of the safest medicaments to have on hand in the home. Because of its ready availability, however, serious poisonings and deaths have been reported within recent years, with a frequency that has become the basis for much concern. The antihistaminics and other recently introduced drugs are misused by children and appear as causative agents in poisonings. Only when it is widely recognized that drugs should be used carefully and stored out of the reach of children may we expect progress in curtailing the present incidence of accidental poisoning.

#### **PESTICIDES**

With the rapid general introduction of potent new insecticides and rodenticides after World War II, the already sizable pesticide problem was increased. Trouble has been caused in the past by the moth (Continued on Page 50)



#### **CLASSIFIED ADVERTISEMENTS**

(Continued from Page 22)

#### PHYSICIANS WANTED (Continued)

WANTED: ORTHOPAEDIC SURGEON, board eligible, to assist Board Orthopedist, younger man, military exempt. California. Box 93,420, California Medicine.

WANTED—STAFF PHYSICIAN, 200-bed Tbc. Hospital. California license and United States citizenship required. Family maintenance on grounds. Write Superintendent, Arroyo Del Valle, Livermore, California

STAFF PHYSICIAN, full time, wanted for 270-bed, chest disease hospital, approved for residency training in pulmonary diseases. Located in Murphys, California. Starting salary \$700 per month, plus home on grounds, furnished. Available July 1, 1957. Must have California license. Apply: Superintendent, Bret Harte Sanatorium, Murphys, California.

#### SITUATIONS WANTED

INTERNIST, 32, married, Board Qualified with special interest pulmonary diseases, wishes permanent association with established Internist or group in California, location other than metropolitan Los Angeles. California license, military obligation completed. Reliable, congenial, willing to work hard. Personal interview requested. Available July 1, 1957. Box 93,310, California Medicine.

GENERAL SURGEON—31, married, Board Eligible, military service completed, California license, available September, 1957, desires location alone, with surgeon, or group. Box 93,445, California Medicine.

PHYSICIAN SURGEON, age 36, graduate Grade A school, varied postgraduate training and general practice experience, desires association, or share space arrangement, in growing community with open staff hospital. Member of California Medical Association and now have locum tenens practice Bay Area. Box 93,365, California Medicine.

SURGEON—32, married, children, Board certified. On staff government hospital. Available July 1, 1957. Desire location for group, association, or individual practice. Box 93,450, California Medicine.

#### RESIDENTS WANTED

WANTED: Resident Physician for 150 bed General Hospital. Excellent opportunity for experience in general medicine and surgery. Salary \$600.00 and up (depending upon qualifications) per month plus two (2) bedroom house on hospital grounds. Apply to John W. Bristow, M.D., Medical Director, Madera County Hospital, Madera, California.

RESIDENCIES IN OBSTETRICS AND GYNECOLOGY—First and third year residency available July 1, 1957, in 225-bed hospital with large clinic service. Hospital approved for two year residency. Apply St. Luke's Hospital, attention Joseph L. Zem, Director, 1580 Valencia Street, San Francisco, California.

SENIOR RESIDENT wanted Department Internal Medicine accredited County Hospital located 28 miles south of San Francisco. Excellent teaching program. Stipend \$400 plus maintenance. Must be citizen and eligible for State Board examinations. Apply J. Paul Sweeney, M.D., 222 39th Avenue, San Mateo, California.

#### LOCUM TENENS WANTED

2 LOCUM TENENS FOR GROUP; June 17 through September, 1957. Pediatrician or GP; Internist or GP. Gallatin Medical Group, 10720 South Paramount Boulevard, Downey, California.

GENERAL PRACTITIONER near San Francisco desires Locum Tenens for two months—June, July, August, or September. California license required. Box 93,430, California Medicine.

(Continued on Page 60)

## Health Problems Occurring from Household Chemicals, Including Drugs

(Continued from Page 45)

repellents containing camphor, naphthalene, or p-di-chlorobenzene; the roach poisons containing fluorine; and the rat poisons containing arsenic, phosphorus, or thallium. Recently the so-called organic phosphorus insecticides, chlordane, chlorophenothane (DDT), sodium fluoroacetate (1080), and others, have been responsible for deaths and severe poisonings despite the stringent provisions of existing legislation.

#### ACIDS AND ALKALIS

Deaths and serious poisoning from lye and other caustic and corrosive acids and alkalis covered by the Federal Caustic Poison Act have declined markedly in most sections of the country. This decrease is attributable in great part to informative labeling and effective law enforcement. Because of certain deficiencies in the law itself as well as social and economic factors beyond statutory control, this group of substances continues to be a problem in certain areas among certain groups. Lye continues to be one of the most frequently offending agents among low-income groups in the South, where the home manufacture of soap is quite common. Several years ago pediatricians in North Carolina tried without success to have its sale for consumer use banned entirely in that state.

#### PAINTS, CLEANSERS, COSMETICS AND MISCELLANEOUS AGENTS

Since paints, cleansers, cosmetics, and miscellaneous agents have much in common with regard to ingredients and labeling, we can consider them together. The labeling in none of these groups is required by federal legislation to reveal information concerning composition or hazards arising with their use or misuse. In those instances in which manufacturers supply such helpful information it is done voluntarily, in compliance with some industry code, or according to local regulations. For example, the American Standards Association issued a standard<sup>5</sup> limiting the lead content in paint for interior use in dwelling units or on furniture or toys. The amount must not exceed 1 per cent of lead of the total weight of the contained solid.

Because of lack of declaration of components, especially the potentially harmful ones, this particular group of products presents some of the greatest problems. Among the items of concern are the solvents, including petroleum products, carbon tetrachloride, and benzene. The serious and fatal poisonings from the inhalation of cleaning fluids containing carbon tetrachloride prompted the New York City Health Department to add a new section to its sanitary code requiring that cleaning fluid containing

(Continued on Page 60)

#### Laos Mission

(Continued from Page 22)

the third, covering baby care, proper cooking, washing, and latrine building, is for the villagers themselves.

The evening is spent in visiting with villagers or in showing American cartoon films. He commented that Bambi "has conquered this part of Southeast Asia."

One of the major problems the Americans face is the "chasm" between their modern medicine and the age-old magic of the Chinese medicine men or

local witch doctors. During the day the stethoscope and American doctor's magic reigns supreme, but "at the fall of night necromancy is potent." In the morning when many are cured, the credit is divided between the two, Dr. Dooley said.

> ARE YOU LOOKING FOR A **NEW POSITION?**

READ CALIFORNIA MEDICINE'S CLASSIFIED ADVERTISING PAGE 22

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A palatable concentrate of 80% purified soy phospholipids (phosphatidy) choline, phosphatidyl ethanolamine and inositol phosphatide) with 20% wheat germ and oat flour in granular form. Dose: 2 to 3 heaping teaspoons (15 to 20 grams) daily; 15 grams supply 1.6 mg, thiamine hydrochloride (added).

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Based on research and formula perfected at University of California, Davis

#### 100 GRAM PORTION CALORIE VALUE

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	) 1.60	
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Milk Sugar		calories
	42.00	

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#### UNIQUE NEEDS

- Some children have unique needs—needs beyond the usual psychological and psychiatric evaluations. With many children it is found that for every therapeutic experience in the professional office or clinic, there are countless other experiences that are not therapeutic —in a tense or conflictual home, in a schoolroom that does not meet their needs, or with peers with whom they cannot cope.
- It is to serve these children that Devereux Schools have designed various milieu programs in which a plan for each child can be designed so that he learns with teachers of special education while he lives in an environment organized so as not to frustrate or threaten him.
- Brochures describing the year-round school, communities, and camps are available by writing Keith A. Seaton, Registrar, Devereux Schools in California, P. O. Box 1079, Santa Barbara, California.



#### **DEVEREUX SCHOOLS**

under the Devereux Foundation a nonprofit organization

**HELENA T. DEVEREUX, Director** 

SANTA BARBARA, CALIFORNIA

DEVON, PENNSYLVANIA

#### **CLASSIFIED ADVERTISEMENTS**

(Continued from Page 50)

#### PRACTICES FOR SALE

ACTIVE GENERAL PRACTICE in actively growing community in Kern County. Refrigerated, individual office building for lease or sale. Brief association considered. Reason for sale—specialization. Box 93,425, California Medicine.

FOR SALE: No capital needed. General Practice. Southern California—near beaches. All overhead paid by owner. 40% to owner each month for one year, then option to buy for \$2,500.00 (with terms). Should gross \$30,000.00 first year. Box 93,455, California Medicine.

ACTIVE EENT PRACTICE, established 26 years, in growing town of 60,000 near Los Angeles. Reason for selling I am retiring. Will introduce. Price reasonable, terms can be arranged. Box 93,415, California Medicine.

FOR SALE: General Practice and modern style, new building completely equipped with refrigerated air conditioning, 2 toilets, 2 change rooms, 2 offices, surgery, pediatric room, recovery room, large leisure room. All equipment and furnishings of new, top quality. Grounds are landscaped with ample owner parking. Located in the center of Barstow, one of the most prosperous and fastest growing cities in Southern California. Present owner retiring. Can be financed. Box 93,435, California Medicine.

GENERAL PRACTICE including solo medical building near San Diego. \$10,000 cash required. Building may also be leased with practice included. Contact James Lowrie, 530 Broadway, San Diego, California. Telephone: BElmont 9-1343.

SAN FRANCISCO PENINSULA—Internal Medicine, established, choice community, completely equipped, including x-ray. Gross \$26,000, which can be increased, if desired. Available now. Will introduce. \$2,000 plus inventory. Also suitable for general practice. Box 93,325, California Medicine.

#### PRACTICE AND EQUIPMENT FOR SALE

OPHTHALMIC EQUIPMENT for sale, and share large office. Sudden illness necessitates limitation. Curtailment of surgery for at least one (1) year is indicated, Large practice, ideally located in San Francisco area, fully and beautifully equipped. Netted \$35,000 in 1956; first quarter of 1957—just short of \$12,000. If interested, should act fast. Room 203, 1300 Bancroft Avenue, San Leandro, California.

#### OFFICES FOR SALE, RENT OR LEASE

OFFICES FOR RENT—First class Medical Building, good location for Specialists, central area downtown Oakland, near Kaiser Center Development, ample parking, public transportation. California Medical Building, 1904 Franklin Street, Oakland 12, California. Telephone: GLencourt 1-4596.

FOR RENT—Location for specialist in growing community in centrally located Medical Building in suburban metropolitan area of Oakland, California. Excellent opportunity for dermatologist, neurosurgeon, obstetrician-gynecologist, orthopod, otolaryngologist, pathologist, pediatrician, radiologist, urologist. Reasonable rent. Now available. San Leandro Medical Building Co., 1556 Leonard Drive, San Leandro, California. TRinidad 2-9200.

FOR LEASE OR SALE in Bakersfield, medical or dental offices. Close in, private parking. Approx. 1100 sq. feet. For details write or telephone Joseph J. Consani, Realtor, 1008 Bradshaw, Bakersfield, California, Telephone: FAirview 5-2391.

LOS ANGELES-IMPERIAL-WESTERN MEDICAL CENTER. For Rent or Lease. Beautiful, modern, medical suites in attractive 18-office building. Ample parking, busy location. Unique rental arrangements. Special consideration to qualified doctors. Owner: 10101 Cheviot Drive, Los Angeles 64, Texas 0-7708.

MODERN MEDICAL SUITE, 1080 sq. ft. Excellent location in fastest growing area in California. On East West Highway 66, Azusa, California. Ample off street parking. Excellent hospital facilities. G.P. or OB greatly needed. Attractive rental proposition. Write or telephone W. G. Wheatley, M.D., 1027 San Gabriel Avenue, Azusa, California. EDgewood 4-2000.

(Continued in Back Advertising Section, Page 90)

## Health Problems Occurring from Household Chemicals, Including Drugs

(Continued from Page 50)

carbon tetrachloride be prominently labeled together with warnings against its misuse. Later the departments of health of the state of New York and the city of New York jointly enacted amendments to their sanitary codes, requiring that hazardous substances in any product in general use be revealed on the label and adequate warnings provided against their misuse.

The question may arise why cosmetics are not included with drugs as controlled by the Food, Drug, and Cosmetic Act. Although the law protects the consumer from dangerous cosmetics under customary conditions of use and requires that the label bear a statement of quantity of contents and the name and address of the manufacturer or distributor, it does not require a declaration of ingredients.

#### PREVENTION AND CONTROL OF ACCIDENTAL POISONING

The conviction that accidental poisoning can be prevented through education, adequate labeling, and continued attention to collection of accurate statistics on morbidity and mortality has encouraged health departments, medical societies, major insurance companies, the American Red Cross, the National Safety Council, and others to undertake protective measures.

Through the concerted efforts of the American Academy of Pediatrics and local health departments, poison control centers have been set up and are operating in 15 cities in Florida and the following other cities:

Albany, N. Y., Atlantic City, N. J., Baltimore, Boston, Buffalo, Chicago, Denver, Durham, N. C., Grand Rapids, Mich., Harrisburg, Pa., Indianapolis, Kansas City, Mo., Lancaster, Pa., Louisville, Ky., Memphis, Tenn., Milwaukee, Montclair, N. J., Newark, N. J., New Bedford, Mass., New York, Nutley, N. J., Oklahoma City, Phoenix, Ariz., Rochester, N. Y., Seattle, Springfield, Ill., Syracuse, N. Y., Washington, D. C., and Worcester, Mass.

Other cities are actively developing poison control centers. Through these centers the attending physician can obtain information concerning the composition of substances involved in poisonings as well as methods of treatment. In turn, he can contribute to the knowledge of substances that are accidentally ingested and acquaint parents with home-safety measures. As this program has progressed and extended nationwide, an awareness has developed of the need for a national center to furnish information to the physician concerning the composition of household articles, collect and evaluate reports of poisoning, and distribute information regarding preventive procedures.

The American Medical Association is devoting special attention to the correction of the accidental misuse of chemical agents found in and around the home through its Committee on Toxicology. The Committee has undertaken a five-point program to

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# alifornia

OFFICIAL JOURNAL OF THE CALIFORNIA MEDICAL ASSOCIATION © 1957, by the California Medical Association

Volume 86

**JUNE 1957** 

Number 6

#### **Presidential Address**

#### DONALD A. CHARNOCK, M.D., Los Angeles

It is a great privilege to greet you as the California Medical Association completes its one hundred and first year of service to the people and to the medical profession of California.

We have passed through some heavy seas during the past year. At times we have seemed to be moving by momentum and steering by dead reckoning, but we have brought our ship into port on schedule and we are now ready for the yearly overhaul and reconditioning which will make it possible to renew our voyage for the next year, better equipped, in sounder condition, and ready for new and more fruitful explorations.

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The Association has had a busy year. The Commissions and their Committees have functioned well. Their manifold activities have been summarized in the Pre-Convention Reports. They deserve more than a casual perusal. They modestly relate the tremendous thought and effort which has been given to many problems and without any mention of the long man hours of work required to bring them to fulfillment. I can assure you that none of this has been easy. Some of these difficulties have required "blood, sweat and tears." Each member of the Calithe many tireless workers.

mittees. Medicare is a good example of this. As you know, Public Law 569 was passed June 8 of last

fornia Medical Association owes a deep gratitude to In all of these efforts, there has been cooperation and excellent integration between the various Com-

year and became effective December 7. In this short period of time, the immediate negotiations were handled by the Committee on Government Financed Medical Care. Backed by the relative value schedule, developed by the Committee on Fees and with the active cooperation of C.P.S. with its vast reservoir of experience in administration and watched over carefully by our astute and capable legal counsel, we have been successful in obtaining a contract which, although far from perfect, is a significant accomplishment. It is interesting that many state associations have used our relative value study as a basis for their negotiations.

Because of the large number of servicemen on active duty in California, this program has grown rapidly. As of April 1, some 15,490 dependents had received professional services, and private physicians had received payments totaling \$693,259.

The completion of transactions regarding blood banks in Fresno brings a workable agreement within that area and a sense of deep satisfaction to those who bore the responsibility for the decisions. We hope that from this experience will come a new orientation with regard to blood banks and county medical organizations.

The work with medical students, interns and residents has been very gratifying. I am sure these young physicians now enter practice with a wider knowledge and better understanding of organized medicine and its problems.

While the work with students necessarily falls within the two larger medical centers, each commu-

Address of the President given before the House of Delegates at the 86th Annual Session of the California Medical Association, Los Angeles, April 28, 1957.

For information on preparation of manuscript, see advertising page 2

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#### **One Year Older**

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LAST YEAR AT THIS TIME, comment was made on the completion of a full century of existence of the California Medical Association and its service to the public. On May 1, just past, the C.M.A. added one more birthday in closing up its 1957 Annual Session.

While this year's session did not set records for attendance it was far from a commonplace meeting.

More than one hundred scientific papers were presented; there were 130 technical and scientific exhibits. Demand for meeting rooms exceeded anything ever seen before, and the House of Delegates pondered one of the longest lists of resolutions ever presented.

New business presented to the House of Delegates included 43 resolutions, three By-Law amendments and one Constitutional amendment. The last-named must lie on the table for one year before being acted upon.

Indicative of the statewide interest in several current topics was the overlapping of resolutions on the same subject. For instance, four resolutions were brought in on the subject of medical education and hospital accreditation. Four more centered around professional liability insurance and its ramifications. Another three referred to the doctor-draft law and the maintenance of advisory committees to Selective Service for the orderly induction of physicians who fall within the scope of the doctor-draft.

The House also turned over to the Council a series of resolutions proposing new programs or departures from earlier established policies.

On the doctor-draft law, the House of Delegates voted its policy as being "vigorously opposed" to the extension of the law beyond June 30 of this year. At the same time, it voted to urge that, should

physicians still be destined for induction into the armed forces beyond the age limits placed on common citizens, the advisory committee to Selective Service should be maintained. Such committees, it was pointed out, could provide an orderly system for calling up physicians and other "specialists" and could, simultaneously, safeguard the civilian population against raids on professional personnel which could be disastrous to communities.

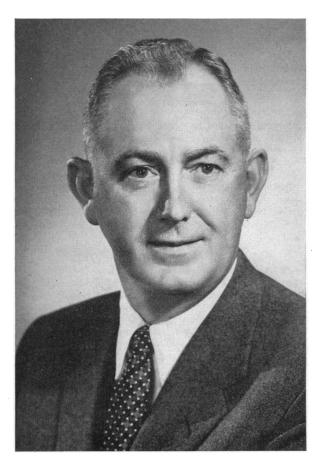
In the field of professional liability, the House voted favorably on a substitute resolution which combined the proposals made in four separate items introduced by authors in various parts of the state. The substitute resolution found benefits to the public, the legal profession and the medical profession in the creation of panels of expert physician witnesses whose services could be called upon in personal injury lawsuits. At the same time, it urged the extension of pre-trial procedures which have been adopted in some areas and have been found extremely helpful in clearing clogged court calendars.

Hospital administrative problems came in for considerable discussion, and decisions of the House of Delegates called for a reevaluation of existing functions of the Joint Commission on Accreditation of Hospitals, the setting by local determination of hospital staff meeting requirements and the retention on approved training lists of hospitals which might not meet their house staff quotas but which continue to maintain adequate training standards. The House of Delegates also called for the privacy of hospital staff records, for new standards for the inspection of hospitals and for the establishment of a statewide hospital accreditation committee which could counsel with individual hospital staffs or county medical societies in the interest of securing higher hospital standards.

The House of Delegates approved a report of a special committee formed a year ago to study the

## Palifornia EDICAL ASSOCIATION

#### NOTICES & REPORTS



#### Francis E. West, M.D.

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OUR NEW PRESIDENT-ELECT, Dr. Francis E. West, was born in Los Angeles on January 31, 1907. He graduated from Loyola High School in Los Angeles, attended Loyola University in Los Angeles for three years, then Stanford University for one year. He entered medical school at the University of Southern California and was in attendance there from 1928 to 1930 when he received his A.B. degree. He transferred his medical education to the

University of California at that time and received his degree in medicine in 1933 from that institution.

His internship in surgery was served at the University of California from 1932 to 1933. He served as a resident in industrial and general surgery at the South San Francisco Hospital from 1933 to 1935, then was a resident in orthopedic surgery at the University of California Childrens Hospital Division, 1935 to 1937, and an instructor in orthopedic surgery at the University of Michigan, Ann Arbor, from 1937 to 1938. From 1938 to 1941 he was associated with Doctors LeRoy Abbott and Frederic C. Bost in San Francisco. Dr. West established his practice in orthopedic surgery in San Diego in 1941. He served in the military service from June 1943 until June 1946; he was discharged as a lieutenant colonel. In his army service Dr. West had charge of the orthopedic section at Gardner General Hospital in Chicago, and was in the orthopedic section at Percy Jones General Hospital in Battle Creek, Michigan.

At present Dr. West is serving as consultant orthopedic surgeon at the U.S. Naval Hospital in San Diego. He is the Southern California area consultant in Orthopedics for the Veterans Administration and is consultant to the Regional Medical Office of the Veterans Administration in San Diego.

The new president-elect is a member of the Pa-

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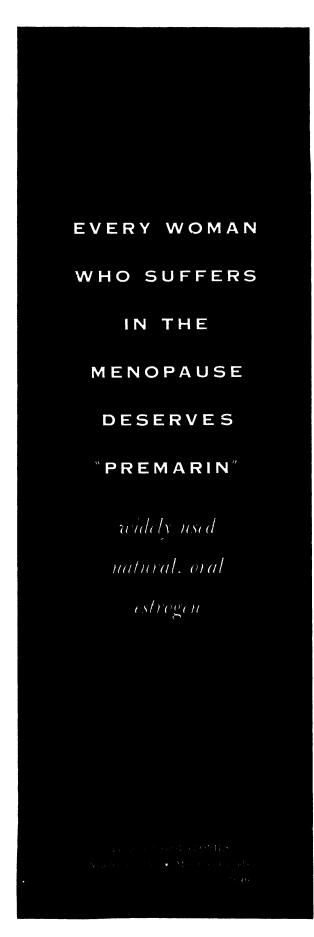
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## Health Problems Occurring from Household Chemicals, Including Drugs

(Continued from Front Advertising Section, Page 60)

(1) encourage informative labeling and safe packaging; (2) stimulate laboratory and clinical research for antidotes; (3) standardize technical nomenclature; (4) develop criteria for evaluating hazardous substances; and (5) sponsor a sustained educational program.

The American Public Health Association has recently established a subcommittee on chemical poisons, which will concern itself with the role of organized public health activities in the prevention and control of accidental poisoning. It will study the problem in all age groups, and its activities will include case-finding, analysis of the factors involved in the etiology, studies of methods of treatment, and the development of a program of prevention and control.

As an informational guide to parents, physicians, hospitals, poison control centers, and others concerned with the prevention of accidental poisoning, the FDA has recently issued a circular titled Protect Your Family Against Poisoning. This provides a series of reminders regarding the handling and storage of drugs, poisons, and other household chemicals.

#### SUMMARY

Throughout the country during the past five years, increased interest in poisoning in the home has produced considerable progress toward the solution of the problem. Much more cooperative effort must be expended, however, in (1) extending our knowledge as to the identity and nature of hazardous substances, including methods of diagnosis and treatment of poisoning arising from them; (2) promoting safe labeling and packaging of household chemicals; (3) restricting from the home environment substances whose hazardous natures outweigh their usefulness; and (4) educating the consumer in the safe use and storage of all nonfood substances.

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- 5. American Standards Specifications to Minimize Hazards to Children from Residual Surface Coating Materials, American Standards Association, Sponsored by American Academy of Pediatrics, Approved Feb. 16, 1955.

From The Journal of the American Medical Association April 6, 1957, Vol. 163 Copyright 1957, by American Medical Association

Reprints of this report may be obtained by writing to the Committee on Toxicology, American Medical Association, 535 North Dearborn Street, Chicago 10, Illinois.

#### **Hyaluronidase Reduces Fracture Swelling**

(Continued from Front Advertising Section, Page 38)

this compound fracture case. In fact, within 30 to 60 minutes after hyaluronidase was injected into the injured area, the swelling of the leg and foot had been reduced to a point where it was possible to close the surgical opening.

The doctors concluded that closing the incision would have been impossible without hyaluronidase. Closure was important since it helped return a normal blood supply to the foot.

#### **Dentistry of Tomorrow**

Permanent teeth really will be permanent for most of the children growing up in the 1960s and a trip to the dentist then will be quite different from one today, an American Dental Association official has predicted.

Peter C. Goulding, secretary of the American Dental Association's council on scientific session, said tooth decay will become less and less a problem as the full effects of fluoridation and other preventive (Continued on Page 74)

#### THE POTTENGER SANATORIUM and CLINIC

For Diseases of the Chest

Monrovia, California

AN INSTITUTION FOR DIAGNOSIS AND THERAPY
(Established 1903)

CHOICE ROOMS and BUNGALOWS. Rates moderate and include routine medical and nursing services, interim physical, x-ray and laboratory examination, ordinary medicines and treatments.

In the foothills of the Sierra Madre Mountains, thirty-five miles from the ocean. Surrounded by beautiful gardens.

Twenty-four hour medical and nursing care.

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**Elliott 8-4545** 



Curtails psychogenic overeating...without a feeling of deprivation...without jitteriness, cardiac pounding, insomnia. Safe for the hypertensive, too.

DOSAGE: For obesity, 1 to 2 tablets 30 to 60 minutes before each meal.

LABORATORIES, INC., Los Angeles

FOR MOOD ELEVATION Rauwidrine provides the needed "lift." Safe for the hypertensive.



#### **Dentistry of Tomorrow**

(Continued from Page 70)

measures are realized. Then other dental disorders will receive most of the dentist's attention.

Writing in a recent issue of *Today's Health*, the American Medical Association's consumer magazine, Goulding pointed out that the major cause of tooth loss is periodontal disease, the disorders that attack the gums and other dental supporting tissue. Even if a person's teeth survive the onslaught of decay, they usually are lost in later life because of periodontal disease.

Dentists now spend 40 per cent of their time repairing the ravages of decay, but in 10 years they

will be spending most of their time on prevention of disease and the rehabilitation of mouths damaged by disease. People will be having more appointments at less cost and without the pain and discomfort "so often and so mistakenly associated with dental treatment," he said.

Fear of pain is probably the chief reason why only 45 per cent of the public sees a dentist each year. Yet even today's anesthetics, treatments, and particularly the newly developed high-speed drills make this fear largely groundless.

By 1967 several other developments now in the (Continued on Page 78)



Located 22 miles south of San Francisco. Accessible to transportation.

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Est. 1925

## Twin Pines NEUROPSYCHIATRIC SANITARIUM

In-Patient services for acute and chronic emotional illnesses

Electric shock Hydrotherapy insulin shock Psychotherapy

Occupational therapy

Out-patient services for selective cases

Open Visiting and Consulting Staff

Attending Staff

A. T. VORIS, M.D., Medical Director DAVID S. WILDER, M.D. • ROBERT E. JAMES, M.D.

## for Hernia

When you refer a patient to M. J. Benjamin you are assured that a support will be carefully made according to sound principles backed by two generations of experience.

Shaping each pad to conform to the hernial region permits the covering of a broader surface and the use of a softer material.

Our work is guaranteed to meet with your approval and your patient's satisfaction.

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Los Angeles

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#### COOK COUNTY

#### Graduate School of Medicine

INTENSIVE POSTGRADUATE COURSES

STARTING DATES-SUMMER-FALL, 1957

SURGERY—Surgical Technic, Two Weeks, July 15, August 19 Surgery of Colon & Recrum, One Week, September 16 Basic Principles in General Surgery, Two Weeks, July 8 Surgical Anatomy & Clinical Surgery, Two Weeks, September

30
General Surgery, Two Weeks, September 23
Gallbladder Surgery, Three Days, June 24
Surgery of Hernia, Three Days, June 27
Treatment of Varicose Veins, September 9
Fractures & Traumatic Surgery, Two Weeks, June 17

GYNECOLOGY & OBSTETRICS—
Office & Operative Gynecology, Two Weeks, September 16
Vaginal Approach to Pelvic Surgery, One Week, September 9
General & Surgical Obstetrics, Two Weeks, September 30

MEDICINE—Electrocardiography & Heart Disease, Two-Week Basic Course, July 8

RADIOLOGY—Diagnostic X-Ray (the formal course) Two Weeks, September 16 Diagnostic X-Ray, Clinical Course, by appointment Radium Therapy, One Week, June 24

CYSTOSCOPY—Ten Day Practical Course by appointment PEDIATRICS—Neuromuscular Diseases; Cerebral Palsy, July 8

TEACHING FACULTY—ATTENDING STAFF OF COOK COUNTY HOSPITAL

Address: REGISTRAR, 707 South Wood Street Chicago 12, Illinois

#### **Dentistry of Tomorrow**

(Continued from Page 74)

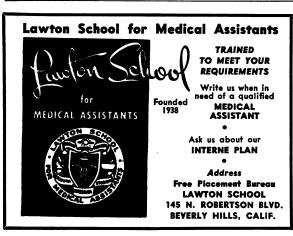
research stage will make dental treatment better and even more comfortable.

Remineralizing agents may be routinely applied to the teeth to repair weakened enamel before cavities can start. Effective antienzyme agents may be in routine use to prevent decay. Filling materials now being tested may be perfected. One would stimulate in the repaired tooth the formation of secondary dentin, the substance underneath the enamel layer, while another would "grow" to the tooth surface and actually help ward off future decay.

A radically new x-ray machine, already used experimentally, is likely to be in general use. Called the panoramic x-ray, it revolves around the patient's mouth, taking a picture of all the teeth on one film.

Even the future office and type of practice will be greatly changed, Goulding said. Instead of one man working alone in a small office, almost all dentists will have one or two assistants. A large number will be practicing with groups of specialists. In such an office, an over-all plan of treatment would be outlined for the patient, with each specialist giving treatment in his field.

(Continued on Page 94)



## PHYSICIANS AND PSYCHIATRISTS FOR CALIFORNIA

State hospitals, correctional facilities and veterans home. No written exam required.

Three salary groups:

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U. S. citizenship and possession of or eligibility for California license required.

Write: Medical Recruitment Unit, Box D, State Personnel Board, 801 Capitol Ave., Sacramento, California

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AND Psychiatric
Linic

This facility provides an informal atmosphere seldom found in hospitals elsewhere. Our approach is eclectic, with emphasis along the lines of dynamic and psychobiologic psychiatry.

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Information upon request.

Address: HERBERT E. HARMS, M.D. Superintendent Livermore, California Telephone 313 CITY OFFICE: OAKLAND 411 30th Street GLencourt 2-4259

## Reason Found for One Type Of Sudden Death

Why a seemingly trivial disorder can break into a raging infection that ends in death within a few hours is a question which has baffled physicians for years.

But recently reported work by physicians and laboratory scientists has given at least a partial answer to this "dilemma of death without explanation," and has provided a way of combating it in some cases, according to an article in a recent issue of *Today's Health*, the American Medical Association's consumer publication.

The center of the problem is gamma globulin—or rather the lack of it in the body, Dr. W. W. Bolton, Chicago, associate director of the A.M.A.'s bureau of health education, said. Without this blood factor, the body has no defense against constant infection.

Luckily this lack of gamma globulin, known technically as agammaglobulinemia, is not a common occurrence, Dr. Bolton said.

Gamma globulin is the protein fraction of the blood serum that provides protection against disease because it carries special antibodies. Agammaglobulinemia—caused by a recessive hereditary trait—is the failure of special plasma cells in the bone marrow to produce this blood fraction. Just why these cells fail to function has not been determined.

Gamma globulin became well known through its use for temporary protection against polio. It is frequently given to lessen the severity of measles and some other diseases. Used in this way, it provides a passive and temporary immunity to disease. When a person actually has a disease, he develops antibodies against it. These are carried in his serum gamma globulin, usually for the rest of his life.

Gamma globulin can be extracted from donated blood, pooled, and later given in concentrated form to persons lacking it.

However, gamma globulin may not always help protect against infection, Dr. Bolton said. The cause of the illness may be a condition to which most of the population is rarely exposed and the pooled gamma globulin will not contain antibodies to fight it. In other cases the infection may spread too rapidly for the gamma globulin to take effect.

Dr. Bolton noted that some individuals have been found who have only a partial deficiency. Then regular shots may help protect them. The condition is usually seen in children, but it has been reported in a 39-year-old woman who had many infections. Regular treatment with gamma globulin ended her difficulties.

If accumulating evidence shows that agammaglobulinemia may be more prevalent than is now be-(Continued on Page 94)



## Gives little boys big appetites



CYANOCOBALAMIN

(CRYSTALLINE VITAMIN B12)

When appetites lag, REDISOL as a dietary supplement will often stimulate new interest in food. Weight gain follows increased food intake. Cherry-flavored REDISOL Elixir and soluble REDISOL Tablets readily mix with liquids.



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DIVISION OF MERCK & CO., INC., PHILADELPHIA 1, PA.

Tablets: 25, 50, 100 and 250 mcg. cyanocobalamin. Elixir: 5 mcg. per 5 cc.

#### **BOOKS RECEIVED**

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BATTLE FOR THE MIND—William Sargant, Double-day & Company, Inc., 575 Madison Ave., New York 22, N. Y., 1957. 263 pages, \$4.50.

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FIGHT FOR FLUORIDATION, THE—Donald R. Mc-Neil. Oxford University Press, 114 Fifth Ave., New York, 1957. 241 pages, \$5.00.

GUIDE TO MEDICAL WRITING—A Practical Manual for Physicians, Dentists, Nurses, Pharmacists—Henry A. Davidson, M.D., Editor, Journal of the Medical Society of New Jersey. The Ronald Press Company, 15 East 26th Street, New York 10, N. Y., 1957. 338 pages, \$5.00.

MEDICAL SERVICES FOR RURAL AREAS—William A. Massie, Chairman, Health Committee, Council of the Southern Mountains, formerly Field Secretary, The Tennessee Medical Foundation. Published for the Commonwealth Fund, Harvard University Press, Cambridge, Mass., 1957. 68 pages, \$1.25.

MUSCLE RELAXANTS IN ANESTHESIOLOGY—Francis F. Foldes, M.D., Director of Department of Anesthesia, Mercy Hospital, Associate Professor of Anesthesiology, University of Pittsburgh School of Medicine. Charles C. Thomas, Publisher, Springfield, Illinois, 1957. 210 pages, \$7.50.

NEW AND NONOFFICIAL REMEDIES 1957. Containing Descriptions of Drugs evaluated by the Council on Pharmacy and Chemistry of the American Medical Association on January 1, 1957. J. B. Lippincott Company, Philadelphia, 1957. 582 pages, \$3.35.

PHYSICAL EXAMINATION IN HEALTH AND DISEASE—New Second Edition—Rudolph H. Kampmeier, A.B., M.D., Professor of Medicine, Vanderbilt University School of Medicine. F. A. Davis Company, Philadelphia 3, Pa., 1957. 774 pages, \$9.50.

PHYSIOLOGIC PRINCIPLES OF SURGERY—Edited by Leo M. Zimmerman, M.D., Professor and Chairman of the Department of Surgery, Chicago Medical School; and Rachmiel Levine, M.D., Chairman, Department of Medicine, University of Chicago. W. B. Saunders Company, Philadelphia, 1957. 988 pages, \$15.00.

PRACTICE OF MEDICINE, THE—Editor Jonathan Campbell Meakins, C.B.E., M.D., LL.D., D.Sc. Sixth Edition. The C. V. Mosby Company, St. Louis, 1957. 1916 pages, 318 illustrations, \$16.00.

PRINCIPLES AND ART OF PLASTIC SURGERY, THE—Sir Harold Gillies, C.B.E., F.R.C.S., and D. Ralph Millard, Jr., M.D., Assistant Clinical Professor of Plastic Surgery, University of Miami, Florida. Little, Brown and Company, 34 Beacon Street, Boston, 1957. In Two Volumes, Boxed. 690 pages, 2472 illustrations, 122 in color, \$35.00.

PRINCIPLES OF UROLOGY—An Introductory Textbook to the Diseases of the Urogenital Tract—Meredith F. Campbell, M.S., M.D., F.A.C.S., Emeritus Professor of Urology, New York University. W. B. Saunders Company, Philadelphia, 1957. 622 pages, 319 figures, \$9.50.

RADICULAR SYNDROMES—With Emphasis on Chest Pain Simulating Coronary Disease—David Davis, B.S., M.D., The Year Book Publishers, Inc., 200 East Illinois, Chicago, 1957. 266 pages, \$6.50.

RIDDLE OF STUTTERING, THE—C. S. Bluemel, M.D., The Interstate Publishing Company, Jackson & Van Buren, Danville, Illinois, 1957. 142 pages, Hard bound, \$3.50; Paper bound, \$1.50, Accompanying 4 therapy records, \$3.00.

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(Continued from Front Advertising Section, Page 60)

#### OFFICES FOR SALE, RENT OR LEASE (Continued)

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## Standard Nomenclature Gives Physicians a Common Language

You may think you have poison ivy and your doctor may even tell you that you do, but when he records his diagnosis, he will call it "dermatitis venenata."

What you call "athlete's foot" he'll call "dermatophytosis." And his secretary will simply file it as "112-211."

This may look like a method for confusing the patient and making a mystery of something simple, but it isn't. The patient isn't the only one who has been confused by terminology; so have the doctors. Calling athlete's foot "112-211" is one result of years of effort to give them a common language.

It's called the Standard Nomenclature of Diseases and Operations, which is published as a book by the American Medical Association. It is now used by more than 85 per cent of American hospitals, and has wide foreign distribution. It is also used in private physicians' offices, medical clinics, medical schools and libraries, and even for indexing medical motion pictures and literature.

In order to help people working with the system learn to code and to gain a better understanding of anatomy, the American Medical Association periodically sponsors regional Nomenclature institutes. One will be held August 5-7 in San Francisco. The Institutes are conducted by the editor of the book, Dr. Edward T. Thompson, United States Public Health Service, Washington, D. C., and Mrs. Adaline C. Hayden, Chicago, Certified Record Librarian and associate editor of the Nomenclature.

While the Nomenclature contains more than 16,000 medical terms, they're in good order and anyone with the key can tell quickly just what phlegmasia alba dolens (or 090-522.8) is. It's what may be called "milk leg" or "white leg." This may be colorful but it isn't very accurate.

The Standard Nomenclature is similar to the Dewey Decimal System used in almost all libraries. By a series of numbers it narrows a term down from a broad category to a specific part of the body, tells just what is wrong there and what caused it.

The numbers on the left side of the hyphen show where the disease is; those on the right show what caused it or what type of operation was or should be performed.

Thus athlete's foot or dermatophytosis is 112-211. Reading it as the numbers accumulate: 1 means diseases of the integumentary system; 11, the skin proper; 112, specifically the epidermis; -2 means diseases or infections due to fungus or animal parasites; -21, the hyphomycete group of fungi, and -211 the particular fungus, the Trichophyton. Taken all together they spell dermatophytosis. By no means could this be mistaken for skin rash due to strawberries, or poison ivy. Poison ivy would be 110-3001. The 1 indicates it's a disease of the skin but

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#### **Dentistry of Tomorrow**

(Continued from Page 78)

The payment of dental costs probably will be different. Instead of the current post-payment plans that spread the expenses over one or two years, there probably will be prepayment plans such as are now available for medical expenses.

There will be fewer dentists, proportionately, than there are now, but they will treat more patients—perhaps 100 million in 1965 as compared with 75 million in 1955. And dental costs will be less over a lifetime than they are now, mainly because the emphasis will be on prevention and rehabilitation, he concluded.

#### Reason Found for One Type Of Sudden Death

(Continued from Page 84)

lieved, it is possible that routine testing of infants to determine the gamma globulin content of their blood might be instituted, Dr. Bolton said. However, since it is still considered rare, such a test should not be done unless a specific inheritance factor is suspected.

Present information indicates there is little likelihood that this unusual blood deficiency will ever become a widespread problem, but for those patients with it, these new developments are of tremendous importance, Dr. Bolton concluded.

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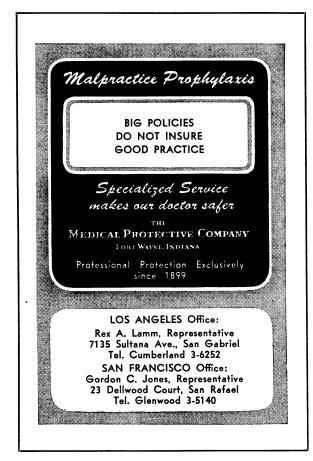
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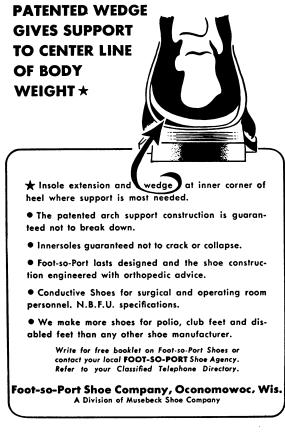
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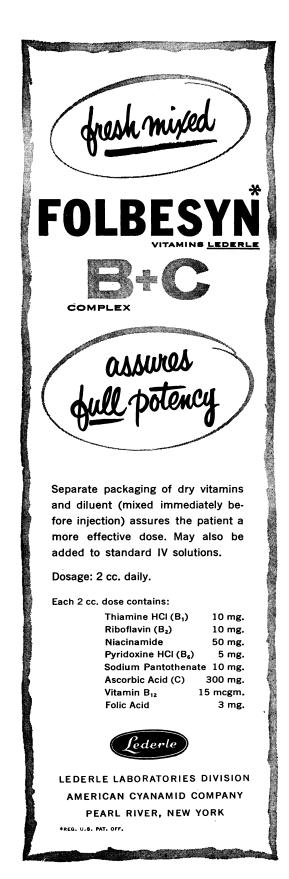
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## Standard Nomenclature Gives Physicians a Common Language

(Continued from Page 90)

from there on it separates itself from athlete's foot in no uncertain terms.

There's little margin for error. For instance, a physician taking care of a patient who had moved from another town could look at the records and find that the patient once had suffered from a stomach ulcer. If the system is used properly, there's little chance he would confuse this with a duodenal ulcer, which is in a different place entirely.

Once upon a time, this could have happened. This was particularly true with diseases which were named after the men who discovered them. Sometimes there might be as many as six different diseases bearing—in one form or another—the same man's name. In fact, there might be two or more men with the same name for whom entirely different diseases were christened. To avoid this confusion the Standard Nomenclature has ruled out men's names. It names diseases by the site they affect and by what causes them.

With these revisions and with new diseases and operations constantly being reported, the *Standard Nomenclature* has to be kept current. In the 1952 edition, for instance, there were more than 5,800 changes. The book has been revised five times since it was first published in 1933.

One of the big jobs it has done is to cut down the number of terms the physician must wade through for the right one. There are more than 2,000 terms that refer to tumors—many inaccurate or duplicating. Only 210 are preferred and that's all that appear in the Nomenclature itself. All others are listed in the index with a reference to the preferred term.

The words in the Nomenclature itself are the correct terms that are most acceptable to the majority of physicians as shown by surveys of the current medical writing. The editors work with 23 committees composed of recognized authorities in their fields. These committees are appointed by the editorial board, which is appointed by the American Medical Association Board of Trustees.

Members of the editorial board, which will serve until the next edition is published in 1960, are Selwyn D. Collins, Ph.D., Division of Public Health Methods, U. S. Public Health Service, Washington; Dr. Edwin L. Crosby, director of the American Hospital Association, Chicago; Dr. Austin Emith, editor of the American Medical Association Journal, Chicago; Dr. Richard Plunkett, associate director, Joint Commission on Mental Illness and Health, Cambridge, Mass.; Dr. Thompson, and Mrs. Hayden. The chairman is Dr. George Baehr, Health Insurance Plan of Greater New York, who spearheaded the standardization movement in 1928.

As use of the book spreads, Mrs. Hayden receives

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## Standard Nomenclature Gives Physicians a Common Language

(Continued from Page 98)

more and more requests, now averaging about 400 a month. Many of them are from record librarians who don't think a physician should use a term such as "black eye." He shouldn't. It's not in the book; neither is "bruise," which means about the same thing. He should say "contusion" and specify the site.

But if this sounds like hair splitting, the editors of the *Standard Nomenclature* do make allowances for a physician's human side. One of the latest terms added to the index as a cause of death is simply "fright."

In the body of the book, death due to fright is properly termed "psychophysiologic cardiovascular reaction," meaning a general emotional and physical reaction of the heart and circulatory system.

But knowing that most physicians probably wouldn't think of it that way, the editors have put "fright" in the index with the notation, "See Psychophysiological disorders." It will probably remain until physicians are accustomed to thinking in the more technical term. Then it will be removed, as has "consumption," the old-fashioned term for tuberculosis.



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